



Piedmont Geriatric Hospital
A LEADER IN GERIATRIC PSYCHIATRY

INFORMATION

FOR

PATIENTS

AND

AUTHORIZED REPRESENTATIVES

Revised June 6, 2018

**If you need help ask staff to call
Human Rights Advocate
434-767-4401 [Ext. 73532]**

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PATIENT RIGHTS

Under Virginia law and regulations, Patients at Piedmont are guaranteed certain rights which include:

- **Knowing and exercising your rights**
- **Asking questions about your rights**
- **Retaining legal rights under federal and state law.**
- **Receiving assistance in applying for benefits.**
- **Being treated with dignity and respect.**
- **Participating meaningfully in decisions regarding all aspects of services affecting you and attending team conferences**
- **Self administering medication if the treatment team determines it is safe**
- **Reasonable privacy during treatments and personal care.**
- **Communicating privately with any person by mail and have help in writing or reading mail as needed.**
- **Communicate privately with any person by telephone and have help in doing so.**
- **Keeping and using personal things to the extent that safety and space permit.**
- **Approving or refusing release of records (confidentiality of protected health information)**
- **Requesting access to information about you**

- **Being protected from harm, abuse, neglect and exploitation.**
- **Having a nutritionally adequate diet, sufficient and suitable clothing and a humane safe environment.**
- **Practicing a religion and participate in religious services subject to their availability, provided that such services are not dangerous to the individual or others and do not infringe on the freedom of others.**
- **Requesting a second opinion of any objections to treatment by someone not involved in your treatment.**
- **Enjoy all freedoms of everyday life that are consistent with your needs for services and protection, and that do not interfere with protection or services of others.**
- **Choosing to participate or not participate in research.**
- **Visiting and being visited by others outside of the facility**
- **Voicing complaints if you feel the facility has violated your rights.**
- **Registering and voting**
- **Having access to the facility's Human Rights advocate to help you exercise your rights or provide further information and answer questions.**

PATIENT RESPONSIBILITIES

- **Be honest with your doctor and provide accurate and complete information to your doctor regarding your present condition and past illnesses, hospitalizations and medications.**

- **Report any changes in your condition or new problems to a nurse, doctor or staff.**
- **Ask questions about any information or instructions you do not understand.**
- **Participate in treatment planning to the best of your ability**
- **Accept the results of not following your treatment plan.**
- **Follow facility policies and procedures and respect the rights and property of others.**
- **Cooperate with the Reimbursement Office to obtain benefits to which you are entitled and determine financial responsibility.**
- **Report safety concerns to staff**
- **Report violation of rights immediately to staff or Human Rights Advocate**

PATIENT COUNCIL

All Patients are invited to participate in Patient Council which meets weekly. This provides an opportunity to express concerns and suggestions of interest to other Patients. Staff advisors assure that issues raised are addressed and Council may request that particular staff attend to discuss issues.

AUTHORIZED REPRESENTATIVES

If a patient is determined by a licensed professional to be unable to make decisions, an Authorized Representative (AR) is appointed to assure someone is available to make decisions for the Patient. The Admissions Unit Social Worker consults with the Patient and his/her family to determine the most appropriate person to fill that role.

Patients are informed when an authorized representative is appointed. If a patient objects to a decision made by an authorized representative, he has the right to a thorough review of the decision. In some cases this includes a Local Human Rights Committee hearing.

WHAT TO BRING

If possible, patients need to bring a seven-day supply of clothing for everyday needs that can be machine washed and dried.

WHAT NOT TO BRING

Patients are not allowed to bring matches, cigarette lighters or sharp objects.

TELEPHONE

Access to the telephone may be limited only if, in the judgement of a licensed professional, communication with another person or persons will result in demonstrable harm to you or significantly affect your treatment.

Patients are encouraged to attend therapeutic groups when offered and to make phone calls when groups are not in session. Following are the preferred times to make or receive calls:

**Monday – Friday: 8:00 to 9:30 a.m.
 11:00 a.m. to 1:30 p.m.
 2:15 to 11:00 p.m.**

Weekends and Holidays: 8:00 a.m. to 11:00 p.m.

Urgent calls may be made outside of these time frames, at the discretion of the charge nurse on the unit or another treatment team member.

Incoming emergency phone calls between the hours of 11:00 p.m. and 8:00 a.m. will be referred by the charge nurse on the unit receiving the call. The nurse will determine the urgency of the call; urgent calls will be provided to the patient right away, while non-urgent calls will be deferred to the next convenient opportunity.

Use of the telephone may be limited to certain times and places to make sure that other individuals have equal access to the telephone and that they can eat, sleep, or participate in an activity without being disturbed.

VISITATION

Visitation Areas

Patients have the right to receive or refuse visitors and to enjoy visits in private. There are available visitation areas on each floor; and visits may be made on the grounds for patients who have an appropriate privilege level to do so

Children must be at least 12 years old to visit beyond the main lobby doors unless special permission is granted by Nursing and/or Medical staff. Arrangements can be made for visitation with children off of the unit.

Generally it is preferred for only three (3) visitors to visit with a patient at a time unless permission is granted by Nursing and/or Medical staff otherwise.

Visitors are also encouraged to postpone visits to another day if experiencing upper respiratory symptoms such as cough, fever, cold or other infectious symptoms such as vomiting or diarrhea. One of our goals is to keep our patients as free from infections as possible. With your assistance we will be more successful.

Visiting Hours

To ensure safety and security of patients, visitors and staff, usual visiting hours are from 10:00 a.m. to 5:00 p.m. daily. Visitors may enter and exit through the main hospital entrance, sign in at the Receptionist area, and obtain a visitor badge.

Special arrangements to visit outside of regular hours can be made with prior communication with Medical and Nursing staff so that 24-hour access is available for patients' immediate family and other relatives. Non-family visitors may also have 24-hour access but are subject to reasonable restrictions.

Before giving items to patients

Please bring any packages to nursing staff for inspection for hazardous or potentially dangerous items. Please consult with a nurse or physician before bringing food and/or drink or other personal items to a patient.

Limitations on visits may be imposed for the following reasons:

- **The patient requests the restriction**
- **The patient is at a clinic appointment**
- **Family or visitors have “colds”, the “flu”, skin rashes or any incidence of possible communicable disease that might affect the patient**
- **Closure of a patient unit due to infectious outbreak**
- **The treatment team determines that it is clinically contraindicated.**
- **In accordance to an active restraining order**

Visitors will be asked by staff to leave if the patient desires so as evidenced by the patient:

- **Telling the visitor(s) to leave**
- **Non-verbally indicating the desire for visitor(s) to leave**
- **Rights are being violated in some fashion (i.e. disrupting milieu, compromising safety of others)**

Patients have the right to reasonable access to any individual that provides health, social, legal, or other services to patient, subject to patients' right to deny or withdraw consent at any time. No one will be denied visitation privileges on the basis of race, color, national origin, religion, sex, gender identification, sexual orientation or disability.

OFF-UNIT PRIVILEGES

Privileges to leave the unit unescorted and to go outside unescorted are determined by the treatment team; and an appropriate Privilege Level (Unit, Building, Grounds or Community) is assigned. Patients may initiate requests for privileges. Off-ground passes are available with physician's approval and written order.

MAIL

The Hospital takes responsibility for business mail at patients' requests and when the treating psychiatrist determines that a patient is unable to do so and the patient has been informed.

All personal mail is delivered to patient unopened.

Sealed letters may be mailed by delivering them to the unit secretary. Paper, pencil and stamps may provided free of charge for at least one letter every day upon request. However, if you have funds to buy paper, pencils and stamps to send a letter every day, the facility does not have to pay for them.

TAKING PICTURES

Visitors may take pictures only of the patient they are visiting and only with the patient's permission.

CONFIDENTIALITY

Piedmont seeks to protect patients' privacy. Patients or their authorized representative must sign a written authorization before information is released to anyone, except as follows:

- **Medical information may be given to healthcare providers engaged by the Hospital to provide services.**
- **Department of Behavioral Health and Developmental Services employees, consultants or agents who require access.**
- **A patient's insurance company or other third party payor.**
- **Reviewers for Medicaid and other licensure or regulatory agencies evaluating the services provided by Piedmont.**
- **In special circumstances, as provided by law.**

ACCESS TO RECORDS/OBTAINING COPIES

Patients and their authorized representatives have the right to read and obtain copies of the patient's records with staff assistance. Access to the patient record will be granted within 5 working days and arrangements can be made by a physician. Copies may also be obtained.

Health Information Management Department will assist if a significant number of copies are requested. Please give two (2) days notice for such requests. Charges may be imposed for copies as follows:

- First request (*up to 30 pages*): Free
- After the first request, the following fee schedule is applied:

| | |
|--|--|
| First 50 pages | \$0.50 per page |
| Remaining pages | \$0.25 per page |
| Copies from Microfilm | \$1.00 per page |
| Mailing (<i>waived for standard postage</i>) | \$10.00 or actual mailing cost (<i>whichever is less</i>) |

UNIT OR ROOM TRANSFERS

Patients requiring long term care are transferred from the admissions unit to other units upon completion of their evaluation. Patients may also be transferred among other units or rooms within a unit as their needs change or to meet needs of other Patients.

Effort is made to inform patients of transfers and changes in roommates at least two days in advance. However, this is not always possible because the facility is sometimes filled to capacity and emergency situations arise.

Patients have the right to have any objections to transfers or roommate assignments reviewed by their treatment team.

TREATMENT PLANNING

A Treatment Team Conference is where the development and revision of recovery treatment plans and discussion of treatment progress, implementation, and focus takes place. The patient and Authorized Representative/family are encouraged to ask questions and express preferences. Patients have the right to a thorough review of any proposed treatment they disagree with.

The input of the patient's support system is critical for successful care and treatment; therefore, the Authorized Representative and significant others that have contact with patient throughout their stay are asked to report any physical or psychiatric decline or concerns immediately to the staff on the unit where the patient resides.

MANDATORY BLOOD TESTS

As required by Virginia Law, if one of our health care professionals, workers, or employees is directly exposed to a patient's blood or body fluids in a way that may transmit disease, the patient's blood will be tested for infection with Human Immunodeficiency Virus (the "AIDS" virus), and Hepatitis B and C. A physician or other health care provider will tell the patient and that person the result of the test.

As required by Virginia law, if a patient should be directly exposed to blood or body fluids of one of our health care professionals, workers, or employees in a way that may transmit disease, that person's blood will be tested for infection with Human Immunodeficiency Virus (the "AIDS" virus) and Hepatitis B and C. A physician or other health care provider will tell the patient and that person the result of the test.

IMMUNIZATIONS

Our facility actively supports the Centers for Disease Control's (CDC) Advisory Committee for Immunization Practice (ACIP) in that we offer immunization to the following diseases:

1. Pneumococcal pneumonia (2 types 6 months apart) – upon admission if:

- **No medical contraindications (allergic)**
- **No history of previous immunization**
- **An individual received the vaccine more than 5 years prior to reaching age 65**
- **Patient or Authorized Representative does not refuse**

2. Influenza – Yearly during flu season (typically October – March) if:

- **No medical contraindications (allergic)**
- **No history of previous immunization**
- **Patient or Authorized Representative does not refuse**

Each fall you will receive a reminder of the flu vaccine and an updated Vaccine Information Statement. You will only need to respond to the reminder if:

- **You are refusing immunizations**
- **You have knowledge of prior immunization or medical contraindications**

We would also like to stress the importance of using good hand hygiene and respiratory etiquette.

Hand hygiene is recommended by washing with soap and water for at least 15-30 seconds (sing Happy Birthday twice) or by using waterless alcohol sanitizer (dispensers on wall throughout facility) before and after visiting.

Respiratory etiquette requires covering your mouth and nose when sneezing or coughing followed by hand hygiene.

FALL PREVENTION PROGRAM

The Fall Prevention (“Falling Star”) Program provides an individualized plan for patients who are at risk for falls, systematically assesses fall risk factors, provides guidelines for fall and repeat fall preventative interventions, and outlines procedures for documentation and communication procedures. A patient is assessed for fall risks upon admission, when there is a change in medical or cognitive status, when transferred within the facility, upon return from special hospitalization, after a fall, and quarterly.

If it is determined that a patient is at risk for falling, a care plan for fall reduction strategies is implemented. A “falling star” logo will be placed over the patient’s bed and adjacent to the patient’s name plate outside of his/her room; and a wristband will be worn identifying him/her as at risk for fall based on level of risk. All members of the Interdisciplinary Team and the patient’s authorized representative (AR) will be notified within 24 hours.

Clinical interventions for the patients in the “Falling Star” program include but are not limited to:

- Education for the patient, family members, and staff on fall prevention**
- Placing the patient’s bed on the lowest setting except when performing nursing care**
- Ensuring patients have items within reach**
- Conducting routine environmental assessments**
- Encouraging regular toileting**
- Orienting patients to their environment**
- Positioning patients in easily observable areas**

- **Assessing the need for protective or mobility devices, for example:**
 - ⇒ **Lower beds**
 - ⇒ **Mats on the floor**
 - ⇒ **Walkers**
 - ⇒ **Wheelchair**
 - ⇒ **Sensor alarms**
- **Referral to Restorative Nursing Care Program to provide range of motion and assist with ambulation and mobility**

DISCHARGE PLANNING

The unit social worker has primary responsibility for coordinating discharge planning. With input from the patient, authorized representative, family, the treatment team, and the community mental health service, the social worker assures that suitable arrangements have been made prior to a patient's discharge. Any questions related to discharge should be referred to the unit social worker.

Patients and their caregivers are also provided discharge instructions and information to assist with the patient care in the community. The discharge instructions and information may include specifics regarding functional mobility and ways to ensure safety.

ADVANCE DIRECTIVES

An advance directive is a written document in which people clearly specify how medical decisions affecting them are to be made. Under state law any capable adult may establish a medical and/or psychiatric advance directive:

Medical:

- **Living Will** – Indicates what kinds of treatment the person wants or does not want if they are unable to make the decision themselves.
- **Durable Power of Attorney for Health Care** – Authorizes a specific person to make health care decisions any time the person is unable to themselves.

Psychiatric:

A psychiatric advance directive is a legal document used by competent persons to declare their preferences and instructions for future mental health treatment, or to appoint a specific person in advance to make those decisions in the event of a psychiatric crisis during which the person may lose capacity to make reliable health care decisions.

Both types of advance directives are honored by all hospitals and are sent with patients if they are transferred.

A patient wishing to establish a medical or psychiatric advance directive should consult a physician or the Human Rights Advocate. The facility will not condition the provision of medical care or discriminate based on whether or not a patient has executed an advance directive.

RESUSCITATION POLICY

Piedmont Hospital is committed to providing quality medical care to all patients to sustain life and relieve suffering and to honoring the patient's right to make decisions about his treatment.

Resuscitative services are provided for all patients having a witnessed cardiac arrest, unless their record contains a physician's order that resuscitation is not to be provided. Such an order may be written when requested by a patient the doctor determines is capable of making the decision, or when the conditions of an advance directive are met.

For patients who are unable to make the decision and who have no Advance Directive, the authorized representative may request a "Do Not Resuscitate" (DNR) order if he or she determines that the quality of life after resuscitation would be unacceptable to the patient or that resuscitation would be futile.

The presence of a "Do Not Resuscitate" (DNR) order on a patient's record does not affect other treatment decisions made for the patient.

REPORTING OF DEATHS TO OTHER ORGANIZATIONS

The Code of Virginia 32.1-263 requires the Medical Examiner to make a determination if an autopsy is required if a patient passes away within a State Facility.

EXPLANATION OF BENEFITS (EOB)

When a patient receives an Explanation of Benefits (EOB) through the mail, it will be kept on file for 30 days. During this time, if you wish to attain the EOB, please notify the Social Work Department at 434-767-4401.

SERVICES AND CHARGES

Piedmont Geriatric Hospital is an all-inclusive rate facility. This includes the following services:

- **Room and Board**
- **Pharmacy**
- **Nursing services**
- **Therapies**
- **Psychiatric services**
- **Medical supplies**

Medicaid and Private Pay are the primary means of reimbursement for services. Primary Commercial insurance plans can also be billed for services as long as Piedmont is part of their network. No person is denied treatment because of inability to pay the cost of care.

Medicaid is the primary payor at Piedmont Geriatric Hospital. Room and Board services are billed to Medicaid, if eligible, and if services are not covered by other insurances. Co-pay may be required by Medicaid based on patient income and/or assets. If you already have Medicaid prior to admission to Piedmont, your local Department of Social Services (DSS) made your eligibility determination. New applications for Medicaid are initiated by Piedmont's Reimbursement Office and a Department of Medical Assistance Services (DMAS) representative who is NOT affiliated with either DSS or Piedmont Geriatric Hospital makes the eligibility determination.

The Reimbursement Office will send you or your authorized representative financial information forms that need to be completed and returned to the Reimbursement Office. These financial data forms are necessary in order to make a determination of private pay or Medicaid eligibility. A spend-down of assets may be required for Medicaid eligibility. The Reimbursement Office will assist you with form completion and Medicaid application.

Private Pay is warranted when the patient assets or income are over the Medicaid limit. Private Pay is determined by the assets/income/expenses and needs of the Patient and patient's spouse.

Medicare – As of December 31, 2014, Piedmont Geriatric Hospital does not participate and cannot bill for Medicare services. However, medicine is billed to each patient's Medicare Part D plan.

Long-term care and indemnity insurances (such as Blue Cross/Blue Shield & Commercial Insurances) that pay a daily rate for specified lengths of time are often billable and can be billed for services.

Please supply the Reimbursement office with all identification numbers associated with insurances as soon as possible. Reimbursement prefers to submit billing to any and all insurance and receive payments directly to the facility. Please be advised that patients are liable for charges not covered by insurance.

If you have questions about billing for services or what your insurance may or may not cover, please contact the Reimbursement office at (434)767-4518, (434)767-4443, or (434)767-4444.

You will be notified any time there are changes to the daily rate or covered/non-covered services.

BED-HOLD WHILE PATIENT IS ON LEAVE

Medicaid does not pay to hold a bed while a patient is on leave of absence from the facility for special hospitalization, trial visit, or family visit. However, since admission to this facility is based on commitment and treatment laws pursuant to the Code of Virginia, the patient's bed will be held pending return without charge and service will resume, regardless of payment source, until there is a clinical determination that the patient no longer needs treatment provided at this facility.

NOTICE TO PATIENTS REGARDING PATIENT FUND ACCOUNTS

Patients are entitled to enjoy the freedom to have and spend personal money to the extent consistent with their need for services. Upon written authorization, Piedmont Geriatric Hospital will hold, safeguard, manage and account for the personal funds of a patient by depositing them in an interest-bearing account. Separate accounting is maintained for each patient in a Patient Fund Account (PFA). The PFA is protected by Fiscal accountability and audit.

Patients, their representative payees and others may deposit money in a Patient Fund Account (PFA) at any time.

Checks for the PFA should be made payable to Piedmont Geriatric Hospital, Attention: Cashier, and identified with the patient's name. Families wishing to deposit money for a patient are encouraged to hand-deliver the money to the hospital Cashier or Unit Secretary during business hours (8:15 a.m. – 4:30 p.m.) or to the primary nurse or Shift Supervisor after hours or on weekends.

Patients can withdraw these funds from their account for personal use (e.g. trips, meals, weekly withdrawals, etc.); and a receipt will be issued. Requests for PFA can be made through the Unit Secretary. It is strongly encouraged that a Patient carry no more than \$20.00 at a time. Piedmont Geriatric Hospital is not responsible for funds that are lost, misplaced or stolen while in a patient's possession.

Routine weekly cash withdrawals for patients desiring to withdraw money for their own personal use may be limited to an amount needed to achieve a therapeutic benefit, maintain a safe and orderly environment, intervene in an emergency, or as specifically documented in the treatment plan.

Patients may request balance inquiries, withdrawals or deposits during business hours (8:15 a.m. to 4:30 p.m.) on Monday through Friday. Requests for less than \$50.00 will be honored on the day of the request. Requests for over \$50.00 will be honored within three (3) business days. All requests for weekly PFA should be received in the Cashier's office by 12:00 Noon each Thursday to be distributed by 9:00 a.m. on the following Tuesday.

Change left over from a meal or trip may be given to a Patient who is capable of handling the funds. For Patients who are incapable of handling funds or prefer not to keep the change, the Unit Secretary may hold the funds if the funds were withdrawn from the PFA. If the change is not spent and accumulates to \$3.00 or more, it will be re-deposited back to the PFA.

Since State facilities charge an all inclusive rate, no charges may be made against the PFA for routine personal hygiene items, including but not limited to: hair hygiene supplies, bath or disinfecting soaps, cleansing supplies, razor or shaving cream, toothbrush and toothpaste, denture items, lotions, deodorant, incontinence supplies, over-the-counter drugs and personal laundry. Patient accounts may be charged for special brands of cosmetics or grooming supplies not routinely supplied by the facility or for services in excess of the cost routinely incurred for such items, if specifically requested by the patient.

Listed below are general categories or examples of items and services which the facility may charge to PFAs:

- telephone, television or radio for personal use**
- personal comfort items, notions and novelties**
- personal clothing, reading matter, gifts or flowers**
- premiums for life insurance**
- travel funds to visit home or family**

A quarterly statement will be provided in writing to the patient or authorized representative within 30 days of the end of each quarter and will include the following information:

- identification number and location of the account
- balance at beginning of period
- deposits and withdrawals
- interest earned
- balance at end of period.

Interest is paid on all PFA accounts based on an average daily balance, provided the account has not been closed out during the period for which interest is being computed.

VALUABLES

Valuables include items such as jewelry, credit cards, rare coins, wallets and contents, keys, important documents (Medicaid or insurance policies, deeds, social security cards or citizenship papers). You may store valuables (not funds*) in a locked cabinet in Fiscal Services or retain possession of the valuables; however, the facility will not be held responsible for loss of items you choose to retain in your possession. An inventory is maintained for valuables that are locked in Fiscal Services.

Items that are not defined as valuables (empty purses, shoes, canes, clothing and accessories, etc.) may either be retained by the patient or kept in secure storage. Items that are considered safety risks (belts, knives, weapons) may be placed in secure storage.

Access to valuables and stored items that are not considered safety risks may be requested during your stay at the facility by notifying unit staff.

**Management of funds is described in the section titled NOTICE TO PATIENTS REGARDING PATIENT FUND ACCOUNTS.*

SMOKING POLICY

Piedmont is a tobacco-free facility for patients, staff, and visitors.

FACILITY POSTINGS

1) Names, addresses and telephone numbers for:

a. The state survey agency

VDH-Office of Licensure and Certification
9960 Mayland Drive
Richmond, VA 23233
1-804-367-2106

b. Adult Protective Services

Local Department of Social Services
Nottoway Department of Social Services
344 West Courthouse Road
P.O. Box 92
Nottoway, Virginia 23955
(434) 645-8696

**24-hour, toll-free Adult Protective Services
hotline: (888) 832-3858.**

c. The Medicaid Fraud Control Unit - 1-800-371-0824

2) A statement that the patient may file a complaint with the state survey agency concerning patient abuse, neglect and misappropriation of property (Office of Licensure and Certification)

VDH-Office of Licensure and Certification /
Complaint Unit
9960 Mayland Drive
Richmond, VA 23233
1-800-955-1819

- 3) ***Eldercare Justice Act:*** Efforts to prevent, detect, treat, intervene in, and prosecute elder abuse, neglect, and exploitation and to protect elders with diminished capacity while maximizing their autonomy. Elder justice recognizes an older person's rights and his or her ability to be free of abuse, neglect, and exploitation.
- 4) ***Results of the most recent inspection*** and any plans of correction that are in effect
- 5) ***Written information on how to apply for and use Medicare and Medicaid benefits***, and how to receive refunds for previous payments covered by such benefits
- 6) ***Patient Rights:*** Regulations to further define and protect the rights of individuals receiving services from Department of Behavioral Health and Developmental Services (DBHDS) providers in Virginia. The regulations require providers of services to take specific actions to protect the rights of each individual. The regulations establish remedies when rights are violated or in dispute, and provide a structure for support of these rights.
- 7) ***Health Insurance Portability and Accountability Act (HIPAA)***, a summary of how patient protected health information (PHI) may be used, disclosed and protected as well as patient rights regarding confidentiality.

FACILITY CONTACT INFORMATION:

Piedmont Geriatric Hospital

5001 E. Patrick Henry Highway

P.O. Box 427

Burkeville, VA 23922-0427

Telephone: (434)767-4401

Fax: (434)767-2346